

NPTS/ATS 2000
DAILY TRIP QUESTIONNAIRE



SECTION E - MOBILITY AND CUSTOMER SERVICE

1. I'm going to read some difficulties people sometimes have when traveling. Thinking about your day-to-day travel, please tell me whether each of these is not a problem, a little problem, somewhat of a problem, very much of a problem, or a severe problem for you.

- 1 NOT A PROBLEM
- 2 A LITTLE PROBLEM
- 3 SOMEWHAT OF A PROBLEM
- 4 VERY MUCH OF A PROBLEM
- 5 A SEVERE PROBLEM

- A Highway congestion
- B Worrying about getting into a traffic accident
- C Poor walkways or sidewalks
- D Not knowing about traffic tie-ups or road construction
- E Rough pavement

2. About how many miles did (you/PERSON) personally drive during the past 12 months in all licensed motorized vehicles?

(INCLUDE MILES DRIVEN AS A PART OF WORK.)

_____ MILES

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3. Now we=d like to ask a few questions about the household vehicle in which you are the primary driver.
4. Would you please tell me the make, model, and year of the (FILL VEHTYPE)?
5. About how many miles was the (VEHICLE) driven during the last 12 months? Include mileage driven by all drivers.

_____ MILES

VEHICLE OWNED LESS THAN 12 MONTHS - ASK PROMPT:

About how many miles will this (VEHICLE) be driven in a year?

_____MILES

6. How often (do you/does PERSON) wear (your/his/her) seat belt when driving or riding in a car or other private vehicle? Would you say...
- 1 Always, ⌘ GO TO E8
- 2 Most of the time,
- 3 Sometimes, or
- 4 Never? ⌘ GO TO E8

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7. What are the typical situations when (you do/PERSON does) not wear seat belts?
(CODE ALL THAT APPLY.)

- 1 SHORT TRIPS
- 2 WHEN FORGET
- 3 WHEN IN A HURRY
- 4 IN BACK SEAT
- 5 WHEN PASSENGER
- 6 IN TOWN/CITY
- 7 WHEN NOT ASKED TO
- 8 WHEN IN A CERTAIN VEHICLE (E.G. PICKUP)
- 9 WITH CERTAIN CLOTHES
- 10 FOR MEDICAL REASONS
- 11 WHEN BROKEN/UNAVAILABLE
- 12 WHEN DRIVER
- 13 DON'T LIKE TO
- 14 LONG TRIPS
- 15 WHEN WITH A CERTAIN PERSON
- 16 OTHER ☒ SPECIFY: _____

8. In the past two months, about how often (have you/has PERSON) used public transportation such as buses, subways, streetcars, or commuter trains?

(DO NOT INCLUDE TAXIS.)

- 1 TWO OR MORE DAYS A WEEK (11+ TIMES),
- 2 ABOUT ONCE A WEEK (5-10 TIMES),
- 3 ONCE OR TWICE A MONTH (2-4 TIMES),
- 4 LESS THAN ONCE A MONTH (ONE TIME),
- 5 NEVER
- 6 NOT AVAILABLE

9. In the past week, how many times (did you/did PERSON) take a walk outside including walks for exercise?

_____times

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10. In the past week, how many times (did you/did PERSON) ride a bicycle outside including bicycling for exercise?

_____times

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SECTION F - TRAVEL TO WORK

1. During most of last week, (were you/was PERSON)...

- 1 working, - GO TO F2
- 2 temporarily absent from a job or business, - GO TO F2
- 3 looking for work,
- 4 a homemaker,
- 5 going to school,
- 6 retired,
- 7 or doing something else?

1a. Last week, did (you/PERSON) do any work for either pay or profit?

- 1 YES
- 2 NO - GO TO SECTION G

2. (Do you/Does PERSON) work full time or part-time?

- 1 FULL TIME
- 2 PART TIME
- 3 BOTH - GO TO F2b
- 4 MULTIPLE PART-TIME JOBS - GO TO F2b

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2a. (Do you/Does PERSON) have more than one job?

- 1 YES
- 2 NO - GO TO F3

2b. The next questions are about (your/PERSON's) primary job or occupation.

3. I am going to read four categories of occupations. Please tell me which one your job falls under.

- 1 1. Sales or service.
- 2 2. Clerical or administrative support.
- 3 3. Manufacturing, construction, maintenance, or farming, or
- 4 4. Professional, managerial, or technical
- 5 OTHER - (Please specify:_____)

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4. What is the street address of (your/PERSON's) workplace?

STREET NUMBER _____ STREET NAME _____
CITY _____ STATE _____
ZIP CODE _____

DO NOT ENTER POST OFFICE BOX!

- 4a. Would you please identify the intersection of roads which is closest to (your/PERSON=s) workplace?

FIRST ROAD _____
SECOND ROAD _____

- 4b. Would you please provide a landmark that is close to your workplace? This could be a well known building, park, monument, or school.

IF NEEDED: Transportation planners are interested in workplace location because travel to work often affects other daily travel.

- 4c. Would you please give me the name of your employer so we can look up the address?

5. What is the one-way distance from (your/PERSON's) home to (your/his/her) workplace?

_____ BLOCKS OR MILES

996 = LESS THAN 1 BLOCK

997 = 2 MILE

-3 NO FIXED WORKPLACE ☒ GO TO SECTION G

-4 WORKS AT OR OUT OF HOME ☒ GO TO SECTION G

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6. How many minutes does it usually take (you/PERSON) to get from home to work?

_____ MINUTES

7. What is the main means of transportation (you/PERSON) usually use to get to work?

IF NEEDED: AThat is, the one used for most of the distance?@

- | | | | |
|----|---------------------------------|----|-------------------|
| 01 | AUTOMOBILE | 09 | BUS |
| 02 | VAN (MINI, CARGO, PASSENGER) | 10 | AMTRAK |
| 03 | UTILITY VEHICLE (BRONCO, BLAZER | 11 | COMMUTER TRAIN |
| | 4RUNNER, PATHFINDER, ETC.) | 12 | STREETCAR/TROLLEY |
| 04 | PICKUP TRUCK | 13 | SUBWAY/ELEVATED |
| | | | RAIL |
| 05 | OTHER TRUCK | 14 | FERRY BOAT |
| | | 15 | OTHER BOAT |
| 06 | RV (RECREATIONAL VEHICLE) | 16 | AIRPLANE |
| 07 | MOTORCYCLE | 17 | TAXICAB |
| 08 | OTHER P.O.V. ⌘ SPECIFY | 18 | BICYCLE |
| | _____ | 19 | WALK |
| | | 20 | SCHOOL BUS |
| | | 21 | WORKED FROM HOME/ |
| | | | TELECOMMUTED |
| | | 22 | OTHER ⌘ SPECIFY: |
| | | | _____ |

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8. (Do you/Does PERSON) usually drive to work alone or in a carpool with other adults?

- 1 ALONE
- 2 CARPOOL

9. On any day in the past two months, did (you/PERSON) work from home instead of traveling to (your/his/her) usual workplace?

- 1 YES
- 2 NO ⌘ GO TO SECTION G

10. About how often (do you/does PERSON) work from home instead of traveling to (your/his/her) usual workplace? Would you say....

- 1 almost every day,
- 2 once a week or more,
- 3 once a month or more,
- 4 a few times a year, or
- 5 once a year?

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SECTION G - TRAVEL DAY

1. How often does PERSON wear (his/her) seat belt when riding in a car or other private vehicle? Would you say...

- 1 Always, ⓧ GO TO INTRO
- 2 Most of the time,
- 3 Sometimes, or
- 4 Never? ⓧ GO TO INTRO

2. What are the typical situations when PERSON does not wear seat belts? (CODE ALL THAT APPLY.)

- 1 SHORT TRIPS
- 2 WHEN FORGET
- 3 WHEN IN A HURRY
- 4 IN BACK SEAT
- 5 WHEN PASSENGER
- 6 IN TOWN/CITY
- 7 WHEN NOT ASKED TO
- 8 WHEN IN A CERTAIN VEHICLE (E.G. PICKUP)
- 9 WITH CERTAIN CLOTHES
- 10 FOR MEDICAL REASONS
- 11 WHEN BROKEN/UNAVAILABLE
- 12 WHEN DRIVER
- 13 DON'T LIKE TO
- 14 LONG TRIPS
- 15 WHEN WITH A CERTAIN PERSON
- 16 OTHER ⓧ SPECIFY:_____

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INTRO Now I have some questions about all trips (you/PERSON) took (yesterday/on TRAVEL DAY). Even though (your/his/her) travel on this day may have been unusual for some reason, we still want to know about (your/PERSON's) trips on this particular day.

3. (Yesterday/On TRAVEL DAY), did (you/PERSON) work at a job that required (you/him/her) to drive a licensed motor vehicle as part of the job--for example a cab or truck driver, delivery person, police officer, or traveling salesperson? Please do not include just getting to and from the workplace.

- 1 YES
2 NO ⌘ GO TO G9

4. What is that job or occupation?

OCCUPATION _____

5. While working at this job on (TRAVEL DAY), did you travel from one place to another more than ten times?

- 1 YES
2 NO ⌘ GO TO G9

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6. On (TRAVEL DAY) about how many miles did (you/PERSON) drive as part of (your/his/her) work, not counting miles driven to and from (your/his/her) place of work?

_____ MILES

7. What type of vehicle did (you/PERSON) drive as part of this job?

IF MORE THAN ONE TYPE, MARK THE TYPE DRIVEN MOST. READ CHOICES AS NECESSARY.

- | | | | |
|----|--|-------------------|------------|
| 01 | AUTOMOBILE | 07 | MOTORCYCLE |
| 02 | VAN (MINI, CARGO, PASSENGER) | 08 | OTHER |
| | | VEHICLE? SPECIFY: | |
| 03 | UTILITY VEHICLE (BRONCO, BLAZER, _____
4RUNNER, PATHFINDER, ETC.) | | |
| 04 | PICKUP TRUCK | 09 | BUS |
| 05 | OTHER TRUCK | 10 | SCHOOL BUS |
| 06 | RV (RECREATIONAL VEHICLE) | 11 | TAXICAB |

8. How many days a week (do you/does PERSON) usually work at this job?

NUMBER OF DAYS _____ (1-7)

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9. Several days ago we mailed a diary to your household for (you/PERSON) to complete about (your/his/her) travel on (TRAVEL DAY). Did (you/PERSON) complete the diary on (your/his/her) own or did someone else complete it for (you/him/her)?

- 1 COMPLETED ON OWN
- 2 SOMEONE ELSE COMPLETED IT
- 3 DIARY WAS NOT COMPLETED AT ALL ⌘ GO TO G11a
- 4 DID NOT RECEIVE MATERIALS ⌘ GO TO G11a

- 9a. Did (you/PERSON) record the trips (you/he/she) made as part of (your/his/her) work?

- 1 YES ⌘ Since it would be too difficult to cover all these trips over the phone, we will send you a self-addressed, stamped envelope to mail (your/his/her) diary to us. For this interview, we'll focus on (your/his/her) other trips.
- 2 NO

10. Do you have (your/PERSON's) completed diary with you now?

- 1 YES ⌘ GO TO G12
- 2 NO

11. Can you get the diary?

- 1 YES (WAIT FOR R TO RETRIEVE THE DIARY) - GO TO G12
- 2 NO

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11a. Let's continue with the interview anyway. Information on (your/PERSON's) travel is important to us. Please try to recall the information as best you can.

12. At the start of TRAVEL DAY at 4:00 a.m. in the morning, (were you/was PERSON) at home or someplace else?

- 1 HOME - GO TO G15
- 2 SOMEPLACE ELSE

13. (Were you/Was PERSON) over 100 miles away from home for the entire travel day?

- 1 YES
- 2 NO - GO TO G15

14. (Were you/Was PERSON) out of the country for the entire travel day?

- 1 YES - GO TO SECTION H
- 2 NO

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15. For the next questions, a "trip" is any time (you/PERSON) went from one address to another. Each stop you make is a separate trip, including picking up or dropping off someone. **Also, we want to record each time you change means of transportation as a separate trip.** For example, driving a vehicle to a subway station and then taking the subway to work should be reported as two separate trips. A bicycle or walking trip that was over 5 minutes should be reported as well.

To be sure we get all the trips (you/PERSON) took during the day, we'll list all (your/PERSON's) trips starting at 4 a.m. in the morning and ending at 4 a.m. the next morning.

Where did (you/PERSON) go first (yesterday/on TRAVEL DAY)?

- 1 HOME ⌕ GO TO G18
- 2 WORK ⌕ GO TO G18
- 3 OTHER ⌕ SPECIFY: _____ ⌕ GO TO G18
- 4 NOWHERE

16. Does this mean (you/PERSON) stayed at the same place all day?

- 1 YES
- 2 NO ⌕ REASK G15

17. On what date did (you/PERSON) last take a trip to another address before TRAVEL DAY?

__MONTH __DAY __YEAR

About how long ago before TRAVEL DAY did you last take a trip to another address?

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- 1 DAYS
- 2 WEEKS
- 3 MONTHS

18. What time did this trip begin?

19. Where did (you/he/she) go next?

- 1 HOME
- 2 WORK
- 3 OTHER ☒ SPECIFY: _____

20. What time did this trip begin?

RECONCILIATION

IF ANY PREVIOUSLY-REPORTED TRIPS REMAIN:

I also show a trip to (DESCRIPTION) at (TIME) reported by (NAME). Did you take this trip?

- 1 YES ☒ INDICATE WHICH TRIP THIS WAS OR ADD TO LIST OF TRIPS
- 2 NO

WHEN ALL TRIPS MADE ON TRAVEL DAY HAVE BEEN LISTED, SAY: While I read the trips, please think back to see if there were any additional ones.

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21. Now I have a few questions about each trip.

You told me the first place (you/PERSON) went was home. What was the main reason (you were/PERSON was) away from home?

- | | | | |
|----|-----------------------------------|----|----------------------------|
| 01 | AT WORK | 09 | TAKE SOMEONE SOMEWHERE |
| 02 | WORK RELATED BUSINESS | 10 | PICK UP SOMEONE |
| | | 11 | VACATION |
| 04 | SHOPPING | 12 | VISIT FRIENDS OR RELATIVES |
| 05 | AT SCHOOL | 13 | WENT OUT TO EAT |
| 06 | AT RELIGIOUS ACTIVITY | 14 | OTHER SOCIAL/RECREATIONAL |
| 07 | MEDICAL/DENTAL | | |
| 08 | OTHER FAMILY OR PERSONAL BUSINESS | 16 | OTHER ☒ SPECIFY:
_____ |

22. What was the main purpose of the trip to (DESTINATION)?

- | | | | |
|----|-----------------------------------|----|--|
| 01 | TO WORK | 09 | TAKE SOMEONE SOMEWHERE |
| 02 | WORK RELATED BUSINESS | 10 | PICK UP SOMEONE |
| 03 | RETURN TO WORK | 11 | VACATION |
| 04 | SHOPPING | 12 | VISIT FRIENDS OR RELATIVES |
| 05 | SCHOOL | 13 | WENT OUT TO EAT |
| 06 | RELIGIOUS ACTIVITY | 14 | OTHER
SOCIAL/RECREATIONAL |
| 07 | MEDICAL/DENTAL | 15 | CHANGE MEANS OF TRANSP. |
| 08 | OTHER FAMILY OR PERSONAL BUSINESS | 16 | OTHER ☒ SPECIFY:
_____ |
| | | 17 | HOME [NOT DISPLAYED ON
CATI SCREEN] |

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23. What was (passenger's) main reason for the trip?

- | | | | |
|----|-----------------------------------|----|----------------------------|
| 01 | TO WORK | | |
| 02 | WORK RELATED BUSINESS | | |
| 03 | RETURN TO WORK | 11 | VACATION |
| 04 | SHOPPING | 12 | VISIT FRIENDS OR RELATIVES |
| 05 | SCHOOL | 13 | WENT OUT TO EAT |
| 06 | RELIGIOUS ACTIVITY | 14 | OTHER |
| | | | SOCIAL/RECREATIONAL |
| 07 | MEDICAL/DENTAL | 15 | CHANGE MEANS OF TRANSP. |
| 08 | OTHER FAMILY OR PERSONAL BUSINESS | 16 | OTHER ☒ SPECIFY: |
| | | | _____ |
| | | 17 | HOME |

24. How far is it from where (you/PERSON) started to (DESTINATION)?

_____ BLOCKS OR MILES
996 = LESS THAN 1 BLOCK
997 = 2 MILE

25. Was a household vehicle used for this trip?

- | | |
|---|----------------|
| 1 | YES |
| 2 | NO ☒ GO TO G27 |

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26. Which vehicle? (IF NEEDED: Which one was used for the longest distance?)

_____ VEHICLE NUMBER OR

-3 HOUSEHOLD VEHICLE THAT NEEDS TO BE ADDED TO VEHICLE ROSTER § AT COMPLETION OF TRAVEL DAY SECTION, CATI WILL ROUTE THROUGH QUESTIONS TO ADD VEHICLE TO ROSTER AND THEN CHANGE -3 CODE TO THE PROPER VEHICLE NUMBER.

27. How did (you/PERSON) get to (DESTINATION)? (That is, what means of transportation did (you/PERSON) use for this trip?)

(TI: ONLY ONE MODE SHOULD BE REPORTED)

01	AUTOMOBILE	09	BUS
02	VAN (MINI, CARGO, PASSENGER)	10	AMTRAK
03	UTILITY VEHICLE (BRONCO, BLAZER 4RUNNER, PATHFINDER, ETC.)	11	COMMUTER TRAIN
04	PICKUP TRUCK	12	STREETCAR/TROLLEY
		13	SUBWAY/ELEVATED RAIL
05	OTHER TRUCK	14	FERRY BOAT
06	RV (RECREATIONAL VEHICLE)	15	OTHER BOAT
07	MOTORCYCLE	16	AIRPLANE
08	OTHER P.O.V. § SPECIFY _____	17	TAXICAB
		18	BICYCLE
		19	WALK
		20	SCHOOL BUS
		21	OTHER § SPECIFY: _____

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28. About how many minutes did (you/PERSON) have to wait for the (PUBLIC TRANSPORTATION MEANS IN G27)?

_____MINUTES

29. About how many minutes did it take to get there?

_____ MINUTES OR _____ HOURS

30. Was anyone with you on this trip?

1 YES

2 NO ⌚

31. Were any household members with (you/PERSON) on this trip?

1 YES

2 NO ⌚ GO TO CHECK ITEM 13

32. (Which household members?)

ENTER ROSTER NUMBER (S): _____

33. Did (G31=2: you/PERSON, G31=1: a member of the household) drive on the trip?

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- 1 YES
- 2 NO ⌘ GO TO CHECK ITEM 14
- 3 PART OF TRIP

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34. Who was the driver? (IF NEEDED: Which one drove the longest distance?)

ENTER ROSTER NUMBER: _____

35. Did any non-household members go with (you/PERSON) on this trip, (such as friends, relatives, or other people you know)?

1 YES

2 NO ⌚ GO TO QUESTION G22 FOR NEXT TRIP/NEXT SECTION

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36. How many non-household members went on this trip with (you/PERSON)?

NUMBER: _____

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SECTION H - TRIPS OF 50 MILES OR MORE FROM HOME

Now I would like to ask about long distance trips of 50 miles or more.

1. In the past 4 weeks, that is, from (DATE) until today, (have you/has PERSON) taken a trip of 50 miles or more one-way from home?

- 1 YES
- 2 NO - GO TO H3
- 3 NEVER BEEN 50 MILES AWAY FROM HOME - GO TO SECTION I

2. On what date did (you/PERSON) make this trip?

MONTH_____ DAY_____ YEAR_____

3. When did (you/PERSON) make (your/his/her) most recent trip of 50 miles or more one-way from home?

MONTH_____ YEAR_____

4. What was the farthest place you reached on this trip?

CITY _____ STATE_____

COUNTRY_____

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5. What was the primary mode of transportation used for this trip?

- | | | | |
|----|---|----|------------------------|
| 01 | AUTOMOBILE/CAR | 15 | AMTRAK/INTER CITY RAIL |
| 02 | VAN (MINI, CARGO, PASSENGER) | 16 | COMMUTER TRAIN |
| 03 | SPORT UTILITY VEHICLE | 17 | SUBWAY/ELEVATED RAIL |
| 04 | PICKUP TRUCK | | |
| 05 | OTHER TRUCK | 18 | SHIP/CRUISE SHIP |
| 06 | RV (RECREATIONAL VEHICLE) | 19 | PASSENGER LINE/FERRY |
| 07 | MOTORCYCLE/MOPED | 20 | RECREATIONAL BOAT |
| 08 | COMMERCIAL/CHARTER AIRPLANE | 21 | TAXICAB |
| 09 | GENERAL AVIATION (CORPORATE/
PERSONAL PRIVATELY OWNED) | 22 | LIMOUSINE |
| 10 | CITY TO CITY BUS | 25 | BICYCLE |
| 11 | CHARTER/TOUR BUS | 26 | WALK |
| 12 | SCHOOL BUS | | |
| 13 | COMMUTER BUS | 27 | OTHER - SPECIFY: _____ |
| 14 | LOCAL PUBLIC TRANSIT BUS | | |

6. In general, how often (do you/does PERSON) take trips of 50 miles or more from home?
Would you say...

- | | |
|---|------------------------|
| 1 | almost every day, |
| 2 | a few times a week, |
| 3 | about once a week, |
| 4 | about once a month, |
| 5 | a few times a year, |
| 6 | about once a year, or |
| 7 | less than once a year? |

7. When did (you/PERSON) take (your/his/her) most recent airplane trip?

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MONTH____ YEAR_____

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SECTION I - DEMOGRAPHICS

Now I=d like to ask a few background questions about (yourself/PERSON).

1. During the last 6 months, how often (have you/has PERSON) used the Internet or the world-wide web? Would you say...

- 1 almost everyday,
- 2 several times a week,
- 3 once a week,
- 4 once a month,
- 5 (you have/PERSON has) access but never use(s), or - GO TO I3
- 6 (you don=t/PERSON doesn=t) have access to Internet/WWW? - GO TO I3

2. Where (do you/does PERSON) use the Internet from?

CODE ALL THAT APPLY

- 1 HOME
- 2 WORK
- 3 OTHER

3. (Do you/Does PERSON) have a medical condition that makes it difficult to travel outside of the home?

- 1 YES
- 2 NO - GO TO I6

4. (Have you/Has PERSON) had this condition for at least six months?

- 1 YES
- 2 NO

5. (REPEAT AS NECESSARY:) Because of this condition, (have you/has PERSON)...

YES/NO

- A Reduced the frequency of travel? _____
- B Limited driving to daytime? _____
- C Given up driving? _____
- D Used the bus and subway more frequently? _____

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E Used special transportation services such as paratransit? _____

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6. What is the highest grade or year of school (you have/PERSON has) completed? READ CHOICES AS NECESSARY.

- 11 LESS THAN HIGH SCHOOL GRADUATE
- 12 HIGH SCHOOL GRADUATE, INCLUDING EQUIVALENT SUCH AS GED
- 21 SOME COLLEGE, BUT NOT A COLLEGE GRADUATE
- 22 ASSOCIATE DEGREE IN COLLEGE (FOR EXAMPLE, AA)
- 24 BACHELOR'S DEGREE (FOR EXAMPLE, BA, AB, BS)
- 25 SOME GRADUATE OR PROFESSIONAL SCHOOL, BUT NO DEGREE
- 26 GRADUATE OR PROFESSIONAL SCHOOL DEGREE (FOR EXAMPLE, MA, MS, MBA, MD, DDS, PHD, EdD, JD)

7. (Were you/Was PERSON) born in the United States?

- 1 YES - GO TO NEXT CHECK ITEM
- 2 NO

8. Where (were you/was PERSON) born?

9. In what year did (you/PERSON) come to the United States?

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SECTION J - HOUSEHOLD LOCATION (ANY HOUSEHOLD MEMBER 18 OR OLDER)

Transportation planners use data from this study to assess current travel patterns and anticipate new ones. These patterns are affected by where people choose to live. Would you please tell me the address of your home?

STREET NUMBER _____ STREET NAME _____
FIRST ROAD _____
SECOND ROAD _____
CITY _____ STATE _____
ZIP CODE _____

DO NOT ENTER POST OFFICE BOX OR RURAL ROUTE!!!

2. Some time ago, we sent some money to your household to show our appreciation for participating. Please indicate whether you agree or disagree with the following statements:

(a) The money helped influence your decision to participate.

- 1 AGREE
- 2 DISAGREE
- 3 NEVER RECEIVED MONEY - GO TO SECTION K

(b) You would have participated without the money.

- 1 AGREE
- 2 DISAGREE
- 3 NEVER RECEIVED MONEY

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SECTION K - HOUSEHOLD INCOME

1. In order to classify your household for statistical purposes, we need an estimate of your total household income in the past 12 months. Please stop me when I get to the category that best describes the total income of your household in the past 12 months.

- 1 Less than \$10,000 ☒ GO TO K2
- 2 \$10,000 to \$20,000 ☒ GO TO K3
- 3 \$20,000 to \$30,000 ☒ GO TO K4
- 4 \$30,000 to \$40,000 ☒ GO TO K5
- 5 \$40,000 to \$50,000 ☒ GO TO K6
- 6 \$50,000 to \$60,000 ☒ GO TO K7
- 7 \$60,000 to \$70,000 ☒ GO TO K8
- 8 \$70,000 to \$80,000 ☒ GO TO K9
- 9 \$80,000 to \$100,000 ☒ GO TO K10
- 10 \$100,000 or more? ☒ GO TO K10

2. Was your household income more or less than \$5,000?

- 1 \$5,000 OR MORE ☒ GO TO K10
- 2 LESS THAN \$5,000 ☒ GO TO K10

3. Was your household income more or less than \$15,000?

- 1 \$15,000 OR MORE ☒ GO TO K10
- 2 LESS THAN \$15,000 ☒ GO TO K10

4. Was your household income more or less than \$25,000?

- 1 \$25,000 OR MORE ☒ GO TO K10
- 2 LESS THAN \$25,000 ☒ GO TO K10

5. Was your household income more or less than \$35,000?

- 1 \$35,000 OR MORE ☒ GO TO K10
- 2 LESS THAN \$35,000 ☒ GO TO K10

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6. Was your household income more or less than \$45,000?
- 1 \$45,000 OR MORE ⌘ GO TO K10
 - 2 LESS THAN \$45,000 ⌘ GO TO K10
7. Was your household income more or less than \$55,000?
- 1 \$55,000 OR MORE ⌘ GO TO K10
 - 2 LESS THAN \$55,000 ⌘ GO TO K10
8. Was your household income more or less than \$65,000?
- 1 \$65,000 OR MORE ⌘ GO TO K10
 - 2 LESS THAN \$65,000 ⌘ GO TO K10
9. Was your household income more or less than \$75,000?
- 1 \$75,000 OR MORE
 - 2 LESS THAN \$75,000
10. Does this include income of all household members?
- 1 YES ⌘ GO TO SECTION M
 - 2 NO
11. Whose income isn't included?

ROSTER NUMBER(S): _____

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SECTION L - INCOME OF PERSONS NOT INCLUDED IN HOUSEHOLD INCOME

1. In order to classify your household for statistical purposes, we need an estimate of (your/PERSON's) total income in the past 12 months. Please stop me when I get to the category that best describes (your/his/her) income.

- 1 Less than \$10,000 ☒ GO TO L2
- 2 \$10,000 to \$20,000 ☒ GO TO L3
- 3 \$20,000 to \$30,000 ☒ GO TO L4
- 4 \$30,000 to \$40,000 ☒ GO TO L5
- 5 \$40,000 to \$50,000 ☒ GO TO L6
- 6 \$50,000 to \$60,000 ☒ GO TO L7
- 7 \$60,000 to \$70,000 ☒ GO TO L8
- 8 \$70,000 to \$80,000 ☒ GO TO L9
- 9 \$80,000 to \$100,000 ☒ GO TO SECTION M
- 10 \$100,000 OR MORE ☒ GO TO SECTION M

2. Was (your/PERSON's) income more or less than \$5,000?

- 1 \$5,000 OR MORE ☒ GO TO SECTION M
- 2 LESS THAN \$5,000 ☒ GO TO SECTION M

3. Was (your/PERSON's) income more or less than \$15,000?

- 1 \$15,000 OR MORE ☒ GO TO SECTION M
- 2 LESS THAN \$15,000 ☒ GO TO SECTION M

4. Was (your/PERSON's) income more or less than \$25,000?

- 1 \$25,000 OR MORE ☒ GO TO SECTION M
- 2 LESS THAN \$25,000 ☒ GO TO SECTION M

5. Was (your/PERSON's) income more or less than \$35,000?

- 1 \$35,000 OR MORE ☒ GO TO SECTION M
- 2 LESS THAN \$35,000 ☒ GO TO SECTION M

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6. Was (your/PERSON's) income more or less than \$45,000?

- 1 \$45,000 OR MORE ⌘ GO TO SECTION M
- 2 LESS THAN \$45,000 ⌘ GO TO SECTION M

7. Was (your/PERSON's) income more or less than \$55,000?

- 1 \$55,000 OR MORE ⌘ GO TO SECTION M
- 2 LESS THAN \$55,000 ⌘ GO TO SECTION M

8. Was (your/PERSON's) income more or less than \$65,000?

- 1 \$65,000 OR MORE ⌘ GO TO SECTION M
- 2 LESS THAN \$65,000 ⌘ GO TO SECTION M

9. Was (your/PERSON's) income more or less than \$75,000?

- 1 \$75,000 OR MORE
- 2 LESS THAN \$75,000